

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Glacier PAC

ADDRESS (number and street)

3242 Cummins Way

☐Check if different
than previously
reported. (ACC)

Missoula

MT

59802

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00353953

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2010

through

01

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Monica Paoli

Signature of Treasurer

Electronically Filed by Monica Paoli

Date

02

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 16

Write or Type Committee Name
Glacier PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	96613.83
(b) Cash on Hand at Beginning of Reporting Period	96613.83	
(c) Total Receipts (from Line 19)	28700.00	28700.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	125313.83	125313.83
7. Total Disbursements (from Line 31)	43949.09	43949.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	81364.74	81364.74
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Glacier PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1200.00	1200.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1200.00	1200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	27500.00	27500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	28700.00	28700.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	28700.00	28700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28700.00	28700.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	18949.09	18949.09	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	18949.09	18949.09	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	25000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	43949.09	43949.09	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43949.09	43949.09	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28700.00	28700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28700.00	28700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18949.09	18949.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18949.09	18949.09

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Glacier PAC

A.

Full Name (Last, First, Middle Initial)

Douglas Lowenstein

Mailing Address 950 F Street, NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Private Equity Council

Occupation

President

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 2 / 2 0 1 0

Transaction ID: C18252113

Amount of Each Receipt this Period

1200.00

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Glacier PAC

A.

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUAR

Mailing Address 4245 N Fairfax Drive
Suite 750City State Zip Code
Arlington VA 22203FEC ID number of contributing
federal political committee.

C C00333104

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 5 / 2 0 1 0

Transaction ID: C18254801

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

DUKE ENERGY CORPORATION PAC

Mailing Address 400 South Tryon Street ST06F

City State Zip Code
Charlotte NC 28285FEC ID number of contributing
federal political committee.

C C00083535

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: C18258286

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF PROFESSIONAL EMPLOYER ORGA

Mailing Address 901 N PITT STREET SUITE 150

City State Zip Code
ALEXANDRIA VA 22314FEC ID number of contributing
federal political committee.

C C00447284

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 1 0

Transaction ID: C18257453

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Glacier PAC

A.

Full Name (Last, First, Middle Initial)

NATIONAL SOCIETY OF ACCOUNTANTS POLITICAL ACTION C

Mailing Address 1010 NORTH FAIRFAX STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

C00129189

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 5 / 2 0 1 0

Transaction ID: C18254802

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

New York Life Insurance Company Political Action C

Mailing Address 51 Madison Ave.
Room 1900

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

C00158881

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 1 0

Transaction ID: C18257455

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

T-MOBILE USA INC. POLITICAL ACTION COMMITTEE (T-P

Mailing Address 401 9th STREET NW
SUITE 550

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00361758

Name of Employer

Occupation

Receipt For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 1 0

Transaction ID: C18257456

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

27500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

A. Full Name (Last, First, Middle Initial) Ashmead Group <hr/> Mailing Address 122 C Street, NW Suite 505 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement PAC Fundraising consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D393798 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>3900.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	1	0	3900.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	6		2	0	1	0													
3900.00																						
B. Full Name (Last, First, Middle Initial) Campaign Compliance LLC <hr/> Mailing Address 3242 Cummins Way <hr/> City Missoula State MT Zip Code 59802 <hr/> Purpose of Disbursement Accounting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D393785 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2275.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	0	2275.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	1		2	0	1	0													
2275.00																						
C. Full Name (Last, First, Middle Initial) Campaign Compliance LLC <hr/> Mailing Address 3242 Cummins Way <hr/> City Missoula State MT Zip Code 59802 <hr/> Purpose of Disbursement PAC Postage/shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D393786 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>3.54</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	0	3.54
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	1		2	0	1	0													
3.54																						

SUBTOTAL of Disbursements This Page (optional)

6178.54

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

A. Full Name (Last, First, Middle Initial) Maura Hagerty	Transaction ID: D393792 Date of Disbursement																				
Mailing Address 223 Massachusetts Avenue, NE 2nd F	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	1	0												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Petty cash	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Maura Hagerty	Transaction ID: D393793 Date of Disbursement																				
Mailing Address 223 Massachusetts Avenue, NE 2nd F	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	1	0												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Petty cash	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Maura Hagerty	Transaction ID: D393794 Date of Disbursement																				
Mailing Address 223 Massachusetts Avenue, NE 2nd F	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	1	0												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Petty cash	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

A. Full Name (Last, First, Middle Initial) Maura Hagerty	Transaction ID: D393799 Date of Disbursement																				
Mailing Address 223 Massachusetts Avenue, NE 2nd F	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	1	0												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Catering/Meals Candidate Name	<table border="1"> <tr> <td colspan="10">29.42</td> </tr> </table>	29.42																			
29.42																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D393796 Date of Disbursement																				
Mailing Address 1225 Eye Street, NW Suite 1225	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	1	0												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Computer Support Candidate Name	<table border="1"> <tr> <td colspan="10">2925.00</td> </tr> </table>	2925.00																			
2925.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D393789 Date of Disbursement																				
Mailing Address 3060 Williams Drive Suite 300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	1	0												
City Fairfax State VA Zip Code 22031	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">1503.03</td> </tr> </table>	1503.03																			
1503.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4457.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393787 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 1 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>64.15</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393800 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>1503.03</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue, 40th FL</p> <p>City Seattle State WA Zip Code 98101-3099</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393779 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 1 0</div> </p> <p>Amount of Each Disbursement this Period <div>287.95</div> </p>

SUBTOTAL of Disbursements This Page (optional)

1855.13

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270	Transaction ID: D393758 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div>
City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit card payment-various Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>1993.32</div> <div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) United Airlines Mailing Address 1025 Connecticut Ave. NW #1210 City Washington State DC Zip Code 20036-5405 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D393767 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>617.89</div> <div>Category/Type</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) United Airlines Mailing Address 1025 Connecticut Ave. NW #1210 City Washington State DC Zip Code 20036-5405 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D393770 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 4 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>38.35</div> <div>Category/Type</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1993.32

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Washington Court Hotel</p> <p>Mailing Address 525 New Jersey Avenue Northwest</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Hotels</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393773</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 636.86</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Drive Suite 300</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393790</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1739.33</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Elizabeth Kelley</p> <p>Mailing Address 7036 N. Wall Avenue</p> <p>City Portland State OR Zip Code 97203</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D393791</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1739.33</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

1739.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC

A.

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address 3060 Williams Drive
Suite 300

City State Zip Code
Fairfax VA 22031

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D393801

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Elizabeth Kelley

Mailing Address 7036 N. Wall Avenue

City State Zip Code
Portland OR 97203

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D393802

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Glacier PAC**A.** Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee

Mailing Address 430 S. Capitol St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
ContributionCandidate Name
Democratic Senatorial Campaign CommitteeCategory/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D393783

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 6 / 2 0 1 0

Amount of Each Disbursement this Period

15000.00

B. Full Name (Last, First, Middle Initial)
MARTHA COAKLEY FOR SENATE COMMITTEE

Mailing Address PO BOX 220 STATE HOUSE STATION

City BOSTON State MA Zip Code 02133

Purpose of Disbursement
ContributionCandidate Name
Martha CoakleyCategory/
TypeOffice Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 00

Transaction ID: D393784

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 1 / 2 0 1 0

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Massachusetts Democratic Party

Mailing Address 10 Granite Street

City Quincy State MA Zip Code 02159

Purpose of Disbursement
ContributionCandidate Name
Massachusetts Democratic PartyCategory/
TypeOffice Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D393788

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 3 / 2 0 1 0

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

25000.00

TOTAL This Period (last page this line number only) ►

25000.00